



Credit Application for Account (Institutional Account Only)

5000 Summer Ave., Memphis, TN 38122 | 8195 Dexter Rd., Cordova, TN 38016
981 Goodman Road W., Horn Lake, MS 38637 | 825 North University Ave., Little Rock, AR 72205

SCHOOL/INSTITUTION: _____ YEAR EST: _____

ADDRESS: _____ ENROLLMENT: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

FAX: _____ SALES TAX EXEMPT #: _____

OWNER / DIRECTOR: _____ CONTACT PERSON: _____

ADDRESS: _____

FUNDING/SPONSOR (If Applicable): _____

ADDRESS: _____

BILLS PAID BY: School Funding | Sponsoring Agency BRANCH _____

BANK REFERENCE: _____ PHONE: _____

ADDRESS: _____ FAX: _____

CITY: _____ STATE: _____ ZIP: _____ ACCOUNT #: _____

CONTINUED ON NEXT PAGE



PLEASE LIST THREE BUSINESS REFERENCES IN THE SECTIONS BELOW.

(Please do not include personal references or utilities.)

Reference 1

NAME: _____ PHONE: _____

ADDRESS: _____ FAX: _____

CITY: _____ STATE: _____ ZIP: _____ ACCOUNT #: _____

Reference 2

NAME: _____ PHONE: _____

ADDRESS: _____ FAX: _____

CITY: _____ STATE: _____ ZIP: _____ ACCOUNT #: _____

Reference 3

NAME: _____ PHONE: _____

ADDRESS: _____ FAX: _____

CITY: _____ STATE: _____ ZIP: _____ ACCOUNT #: _____

PLEASE SIGN THE STATEMENT BELOW

I hereby authorize those firms listed above to release information on my account/credit standing to Knowledge Tree. It is understood that the terms of sale at Knowledge Tree are net 30 days from date of invoice and that these terms will be adhered to. Late payments are subject to a 1% finance charge per month.

If you are tax exempt, please include a copy of your documentation along with this application.

NAME: _____ TITLE: _____ DATE: _____

REMITTANCE EMAIL ADDRESS: _____